

FIRM NUMBER
NAME

## APPLICATION FOR ORIGINAL OCCUPATIONAL LICENSE (PART C)

### A. OWNERSHIP INFORMATION:

List true full name, title of individual, and date of birth; each partner (designate whether general or limited); each principal Officer and Director, or Stockholder of the corporation participating in the direction, control and management of the policy of the business; each Member and Manager of the limited liability company participating in the direction, control and management of the policy of the business; and each member of the association participating in the direction control and management of the association (attach separate sheet if additional space is needed).

PRINT TRUE FULL NAME ( <i>Last, First, Middle</i> )	TITLE	DATE OF BIRTH

### B. CERTIFICATION:

**INSTRUCTIONS:** Complete Section 1, 2, 3, 4, or 5 below depending on whether ownership is an individual, partnership, corporation, limited liability company, or association.

#### SECTION 1 – INDIVIDUAL

**I certify (or declare) under penalty of perjury under the laws of the State of California that the foregoing is true and correct.**

I further certify that I am the sole owner of (print firm name) \_\_\_\_\_  
 and that all answers and information contained within Part A and Part B of this application are true and correct.

SIGNATURE	TITLE	DATE
X		

#### SECTION 2 – PARTNERSHIP

**We certify (or declare) under penalty of perjury under the laws of the State of California that the foregoing is true and correct.**

We further certify that we are co-partners (print firm name) \_\_\_\_\_  
 and that no other person is associated in the ownership of the business, and that all answers and information contained within Part A and Part B of this application are true and correct.

SIGNATURE	SIGNATURE	SIGNATURE	DATE
X	X	X	

#### SECTION 3 – CORPORATION

**I certify (or declare) under penalty of perjury under the laws of the State of California that the foregoing is true and correct.**

I further certify that (print firm name) \_\_\_\_\_  
 is incorporated in the State of \_\_\_\_\_ and our corporate number is \_\_\_\_\_  
 and is authorized by the State of California to transact business in California, and that all answers and information contained within Part A and Part B of this application are true and correct.

SIGNATURE OF CORPORATE OFFICER AUTHORIZED TO SIGN FOR CORPORATION	TITLE	DATE
X		

#### SECTION 4 – LIMITED LIABILITY COMPANY

**I certify (or declare) under penalty of perjury under the laws of the State of California that the foregoing is true and correct.**

I certify that (print firm name) \_\_\_\_\_  
 is incorporated in the State of \_\_\_\_\_ and our LLC number is \_\_\_\_\_,  
 and is authorized by the State of California to transact business in California, and that all answers and information contained within Part A and Part B of this application are true and correct.

SIGNATURE OF MEMBER OR MANAGER AUTHORIZED TO SIGN FOR LLC	TITLE	DATE
X		

#### SECTION 5 – ASSOCIATION

**I certify (or declare) under penalty of perjury under the laws of the State of California that the foregoing is true and correct.**

I further certify that (print firm name) \_\_\_\_\_  
 is an association and that all answers and information contained within Part A and Part B of this application are true and correct.

SIGNATURE OF MEMBER AUTHORIZED TO SIGN FOR ASSOCIATION	TITLE	DATE
X		

